BEST AVAILABLE COPY

									Application or Docket Number					
	PATENT A		CATIO ffective	D	Q	1/599	15	2						
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
FOR			NUMBER FILED			NUMBER EXTRA			ΤE	FEE	1	RATE	FEE	
BASIC FEE										345.00	OR		690.00	
TOTAL CLAIMS			5 minus 20			20= * 3			9=		OR	X\$18=	558	
INDEPENDENT CLAIMS			7 minus 3 =			= * 4			9=		OR	X78=	312	
MU	LTIPLE DEPEN	IDENT C	LAIM PF	RESENT		-					1	.000	,	
* If the difference in column 1 is less than zero, enter "0" in column 2							+13			OR OR	+260= TOTAL	1560		
CLAIMS AS AMENDED - PART II									AL		JON		H- C	
			olumn 1)			Column 2)	(Column 3)	SM	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
AMENDMENT A		CLA REMA AFT AMENC	INING ER		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	*		Minus	**1		=	X3:	9=		OR	X78=		
_	FIRST PRESENTATION OF			JLTIPLE DEF	PENE	DENT CLAIM					1	. 000		
							+13			OR	+260=			
								ADDIT.	FEE		OR	TOTAL ADDIT. FEE		
_	R TY NY TY	(Colui				Column 2) HIGHEST	(Column 3)							
AMENDMENT B		REMA AFT AMEND	INING ER		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΓΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus			=	X\$	9=		OR	X\$18=		
	Independent	*		Minus **		•	= ,	X39)—			X78=		
_	FIRST PRESENTATION C		N OF ML	MULTIPLE DEP		ENT CLAIM					OR	7,70,-		
								+13			OR	+260=		
								TO ADDIT.	FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)														
AMENDMENT C		REMA AFT AMENE	INING TER		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**		=	X\$:	a	,,,,,,	0.0	X\$18=	1,00	
	Independent	*		Minus	**1	*	=	-			OR			
	FIRST PRESENTATION		ON OF MULTIPLE DEF		PENDENT CLAIM			X39	}=		OR	X78=		
	If the entry in any	mn 1 in In	oo than t	o ontro in activ	m= 0	write "0" :		+13			OR	+260=		
***	If the entry in colu If the "Highest Nu If the "Highest Nu The "Highest Nun	mber Prev	iously Pa viously Pa	id For" IN THI aid For" IN THI	S SPA	ACE is less tha ACE is less tha	n 20, enter "20." n 3, enter "3."	ADDIT.		propriate bo		TOTAL ADDIT. FEE lumn 1.		